## UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

EASTERN DIVISION		
-v- /1.29 Arriba Lewis (in custody) NOV 2	SASE NO: 07 CR 746 JUDGE: Der-Yeghiayan 9 2007	
William Damien Carter (in custody)  MICHAEL W  CLERK, U.S. DIS  IS THE DEFENDA		
NOTICE OF ARRAI	GNMENT AND PLEA	
The above-entitled cause has been scheduled for an Monday, December 3, 2007 at 10:00 a.m.	arraignment and the entry of a plea on in Courtroom 1719	
at the Everett McKinley Dirksen Courthouse, 219 Sout	h Dearborn, Chicago, Illinois before the Honorable	
Judge Der-Yeghiayan		
information that will be given to the court to assist in set Office is located in Room 15100 of the Everett McKir Illinois, 60604.  You are entitled to be represented by a lawyer at the arraignment and plea. If you cannot afford to hire a law	provide the Pretrial Services Office with background tring the conditions of your release. The Pretrial Services aley Dirksen Courthouse, 219 South Dearborn, Chicago, the interview with the Pretrial Services Office and at the eyer, you should contact the Federal Defender Program at a attorney will assist you. The Federal Defender Program to, Illinois, 60603.	
CERTIFICATI	E OF MAILING	
I hereby certify that copies of this notice of arraignment	t and plea were mailed to:	
DEFENDANT # 1	DEFENDANT'S ATTORNEY	
Name: Arriba Lewis	Name: Michael Falconer	
Address: in custody	Address:	
City, State, ZIP:	City, State, ZIP:	
AUSA: Barry Rand Elden		
Copies of this notice were delivered to:		
X Court Interpreter	X Pretrial Services Office	
By Laura Springer	Date: 11/29/07	
Additional instructions regarding notice:		
X Docketing Department to Mail Notice	Telephoned Notice by Judges Staff	

## UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

## NOTICE OF ARRAIGNMENT AND PLEA CERTIFICATE OF MAILING (continued)

DEFENDANT #	2	DEFENDANT'S ATTORNEY
Name:	William Damien Carter	Name: Paul E. Paprocki
Address:	in custody	Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT #		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT #		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT #		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT #		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT #		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP:
DEFENDANT#		DEFENDANT'S ATTORNEY
Name:		Name:
Address:		Address:
City, State, ZIP:		City, State, ZIP: